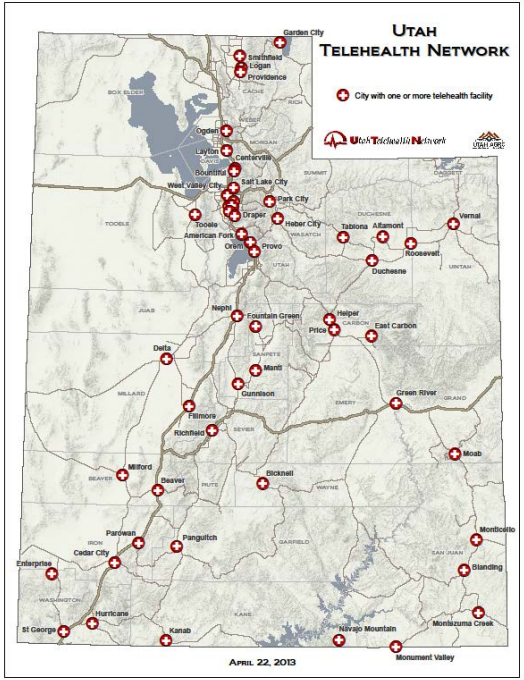
Utah Telehealth Network



- Mission:

  Expand access to health care services and resources through the innovative use of technology

- Connect rural hospitals & clinics, community health centers, local health departments

- Serve those, plus state agencies (UDOH, DHS), University of Utah, health systems, behavioral health programs, and others

Since becoming UETN

UTN'S ROLE:

*Has shifted from **provider** of telehealth to **facilitator** of telehealth*

- Private secure healthcare network to meet the clinical and operational missions of our members
- Cyber security management and support
- An array of media services, including videoconferencing, live streaming, video-on-demand production
- Telehealth development guidance and support

Recent Initiatives

Network Upgrade & Expansion

- Support use of Remote Hosted EHRs, health information exchange, meaningful use, and other HIT
- Increase reliability and redundancy, network speed
- Utilize UEN's robust backbone and support
- Utilize Universal Service Healthcare Connect Funding for 65% discounts for eligible healthcare providers

Recent Initiatives

Cyber Security

- Provide security tools and support to local IT staff, with a focus on prevention.

Vulnerability Status

Issue Statistics: UTN Vulnerability Mgt (Status)

Status	Count	Percentage
RESOLVED	4109	97%
WAITING FOR SUPPORT	7	0%
WAITING FOR CUSTOM...	113	3%
Total	**4229**	

Recent Initiatives

New State-wide Videoconferencing Platform

- Easy-to-use, secure, works on mobile devices, compatible with legacy videoconferencing
- Flexible in its use – suitable for
  - patient care, connecting to homes and patients, but also to high end videoconferencing units in ERs
  - Project ECHO, care coordination, training, & meetings

Recent Initiatives

New State-wide Videoconferencing Platform

- Funded by State of Utah through Medicaid
- Will be offered to health care providers, large and small.
- Decentralized model, centralized support
- Currently in use by early adopters
- Go live – Fall 2016

Potential Study Topics for the Telehealth Work Group

- Trends in telehealth
- Reimbursement
- IT support for rural and small practices

Blockbuster → Red Box → Netflix → Smart TV

Hospital → Clinic → Kiosk → Home → Anywhere

Trends in Telehealth

- Traditional Telehealth still exists
- Hub & spoke -> Direct to Consumer
- New models, including Project ECHO, remote monitoring, store-and-forward
- New providers in the marketplace

Implications of new trends

- Are there issues of care coordination, standard of practice?
- New payment models, not “one size fits all”

Coverage & Reimbursement

- Still the major barrier to adoption, real and perceived. Inconsistent from policy to policy.
- Consider parity legislation: If covered in person and doable via telehealth, cover and reimburse the same
- Consider support for innovative models of care delivery

Other

- Special considerations for rural and small providers
- Growing burden of IT support, network and other issues from their perspective

Resources – UTN Advisory Council

- Diverse representation of telehealth stakeholders – rural, UTN members, State & local agencies, U of U, Intermountain, education and research, others
- August 4 meeting dedicated to this topic – would like the opportunity to share their perspectives

Resources – ATA State Policy Telehealth Resource Center

http://www.americantelemed.org/policy/state-policy-resource-center#.V4fVWPkrLRY

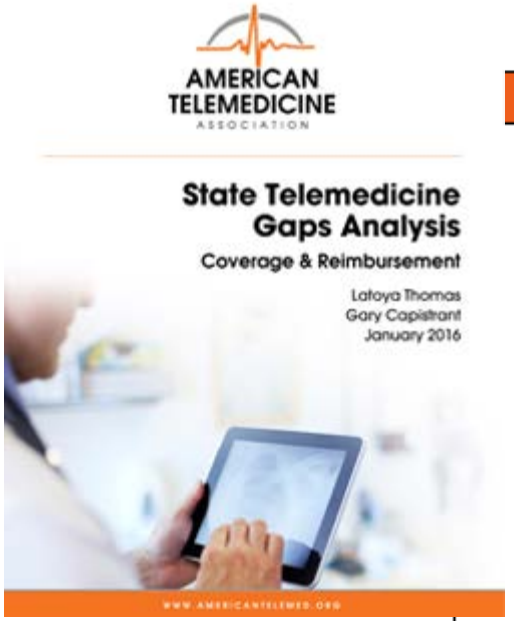
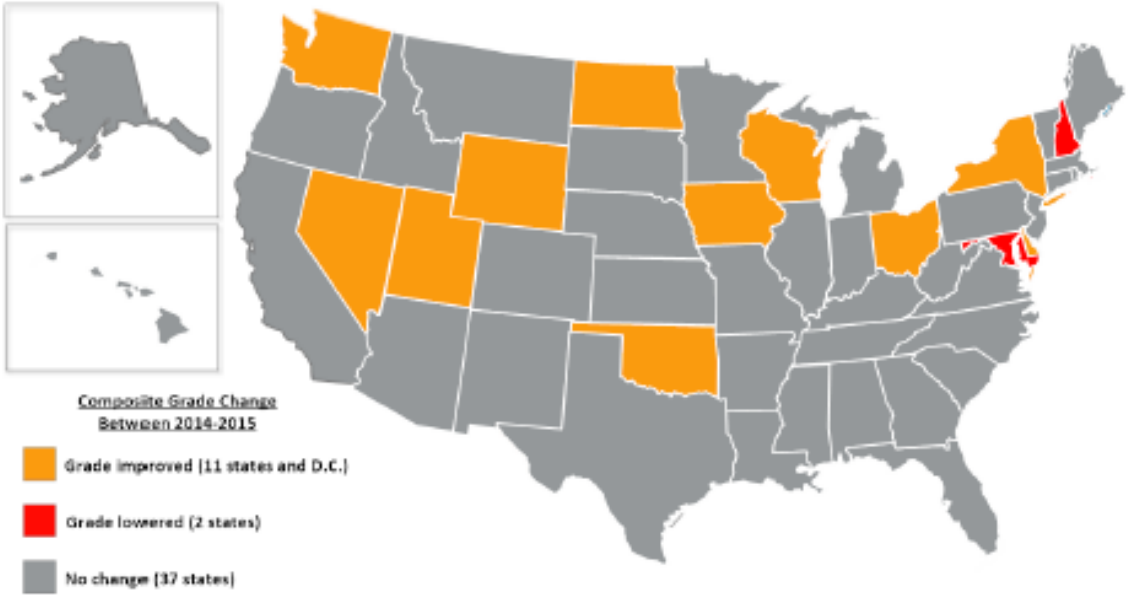
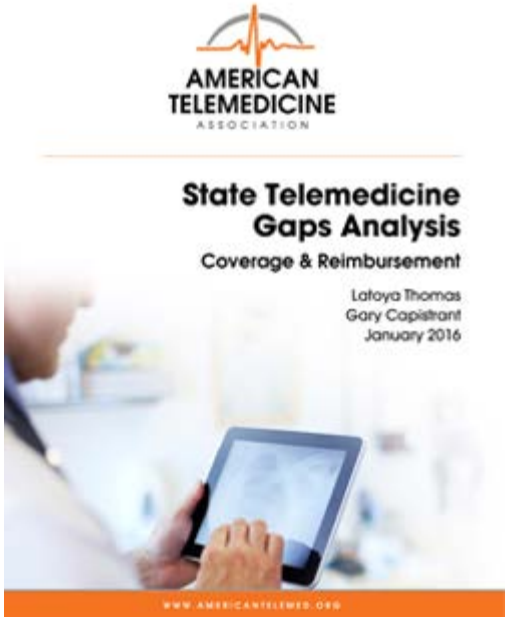


FIGURE 1 – Sept. 2014 - December 2015 Comparison





Telemedicine in Utah

PARITY:	
Private Insurance	F
Medicaid[225]	C
State Employee Health Plan	F
MEDICAID SERVICE COVERAGE & CONDITIONS OF PAYMENT:	
Patient Setting	A
Eligible Technologies	F
Distance or Geography Restrictions	A
Eligible Providers	F
Physician-provided Services	A
Mental/behavioral Health Services[226]	B
Rehabilitation	F
Home Health	C
Informed Consent	A
Telepresenter	A
INNOVATIVE PAYMENT OR SERVICE DELIVERY MODELS:	
State-wide Network	✔
Medicaid Managed Care	
Medicare-Medicaid Dual Eligibles	
Health Home	
HCBS Waiver	
Corrections	
Other	

GAPS:

Progress

- Medicaid issued a notice in 2015 clarifying CMS guidance on telemedicine coverage. UT will cover physician and NP services delivered via telemedicine. However non-medical mental and behavioral health providers are not included in this coverage.[221]

Private Insurance

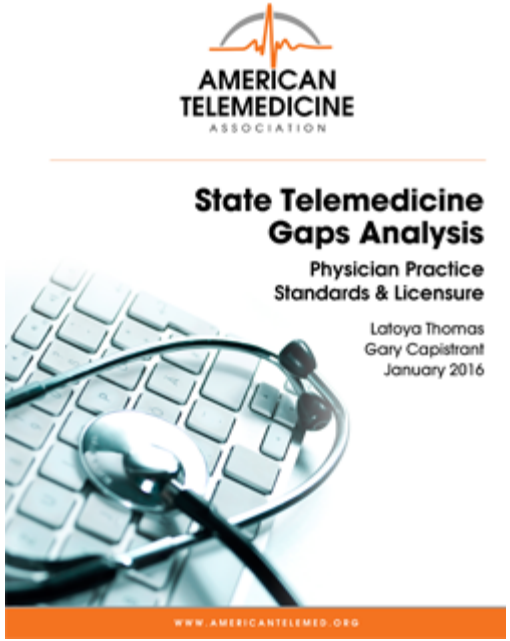
- Bordered by AZ and CO which have parity laws for private insurance. UT has no history of proposed parity legislation within the past 2 years.

Medicaid

- No restrictions imposed on patient or provider settings
- Coverage for skilled nursing services and medication management under the skilled nursing home telemedicine pilot.[222-223]
- Coverage for interactive audio-video only.

Innovation

- Utah Telehealth Network offers clinical, educational, and administrative services via telemedicine across the state.[224]

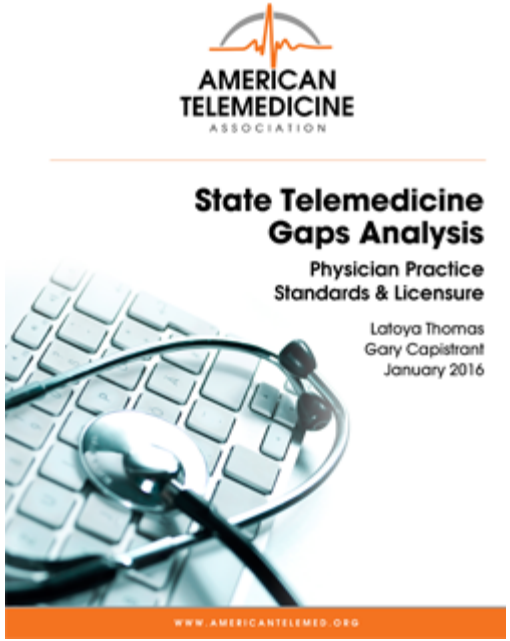


Telemedicine in Utah

PHYSICIAN PRACTICE STANDARDS & LICENSURE:

Physician-patient encounter	A
Telepresenter	A
Informed Consent	A
Licensure & Out-of-State Practice	C
MEDICAL BOARD POLICY OR STATEMENT ON INTERNET PRESCRIBING:	✔
PHARMACY BOARD POLICY OR STATEMENT ON INTERNET PRESCRIBING:	

- Requirements for telemedicine are on par with requirements for in-person services, not including prescribing. No unique practice standard requirements for telemedicine.
- Requires full license and allows P2P exemption.



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